(e) if so, the findings thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANIRAMDOSS): (a) and (b) LRS Institute of TB and Respiratory Diseases, New Delhi is functioning as an autonomous institution under Ministry of Health and Family Welfare. Before its take over by Government in 1989, this institute was earlier known as Lala Ram Sarup Tuberculosis Hospital, and was set up in 1952. The decision to take over the Hospital as an autonomous institution under the Ministry of Health and Family Welfare was taken in the year 1989.

(c) (Rs. in lacs)

Year	Own Generation	Non Plan (Grant)	Plan (Grants)	Total
2003-04	91.32	420	1000	1511.32
2004-05	71.19	583	1294	1948.19

(d) and (e) A peer Review Group has assessed the functioning of the Institute and while appreciating the role played by it has given some suggestions for improvement.

Leprosy affected States

†1271. SHRIAJAY MAROO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Jharkhand, Bihar, Orissa and Chhattisgarh are the most leprosy affected States in the country;

(b) if so, whether the Central Government are conducting any special drive in these States; and

(c) the target fixed to eradicate leprosy completely in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) Yes, Sir. Though Jharkhand, Bihar, Orissa and Chhattisgarh States Constitute 16.4% of India's population, they contribute to 40.9% of total leprosy cases in the country.

(b) Yes, Sir. Focused Leprosy Elimination Plan (FLEP) was carried out in high endemic districts and blocks having prevalence of more than 3 cases per 10,000 population. Under FLEP, increased efforts were put

† Original notice of the question was received in Hindi.

on I EC activities and training of all medical officers and health staff at district level. Block Leprosy Awareness Campaigns were conducted through intensified IEC and Leprosy Counseling Centres at block level.

District Technical support Team are being provided to these States to support and strengthen the activities of National Leprosy Eradication Programme at state and district level.

Various Non Governmental Organisation (NQOs) are also being provided funds (Grant-in-aid) by Government of India to carry out leprosy diagnosis treatment services and prevention of deformities in leprosy, patients.

(c) At present no targets have been fixed to eradicate leprosy completely in the country. The goal of National Health Policy 2002 was elimination of leprosy as a public health problem at National level (i.e. Prevalence of less than 1 case/10,000 population) by December, 2005 and not the eradication. With a prevalence of 0.95/10,000 population, India has already achieved elimination of leprosy as national level by December, 2005. Now the programme is continuing with its focus of attention on endemic districts, endemic urban localities, districts with high disability rate and states with high child proportion.

Banning of Gutkha

1272. SHRIMATIVANGA GEETHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have any proposal to ban gutkha items in the country;

(b) if so, the details thereof;

(c) whether Government have consulted the States before implementing such proposal;

(d) if so, the suggestions received from the States; and

(e) the date by which the proposed ban will come into force?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANIRAMDOSS): (a) and (b) No, Sir. However, draft rules further to amend PFA Rules, 1955 have been published in the Gazette of India vide notification GSR 694 (E) dated 28.11.2005 which *inter alia* propose that tobacco, alcoholic beverages and nicotine shall not be used as an